CLAIMS ONLY

Application Number: 09995205

Filing Date:

Applicant(s):

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2	1						52					
3	1						53					
4	1						54					
5		1					55					
6	1						56					
7	1						57					
8	1						58					
9	1						59					
10	1						60					
11		1					61					
12		1					62					
13		1					63					
14		1					64					
15		1					65					
16	0	10					66					
17	0	10					67					
18	0	5					68					
19	4	5					69					
20							70					
21							71					
22							72					
23							73					
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40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	9						Total Indep					
Total Depend	36						Total Depend					
Total Claims	45						Total Claims					